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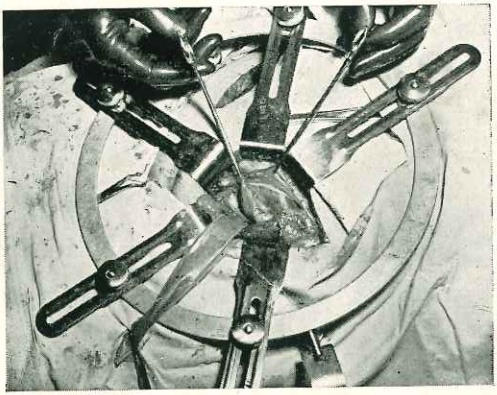
DIRECTIONS and USE OF THE SMITH RETRACTOR

Retraction and Exposure are not just incidents in surgery . . . they are the foundation of a good operation.



Direct Hernia with Claw Retractors

WHILE the instrument itself is as simple as we could make it, its use is as complicated as the problem of retraction and exposure of an operative field.

This is not a simple retractor. It is a number of ROBOT ASSISTANTS. Its mastery requires frequent use and considerable thought.

You must consider packing and exposure a part of the operation and take time to do it completely and satisfactorily. You will save these minutes many times over later in the operation.

Make the incision large enough to give yourself six inches of working space between blades if possible. A long wound heals as quickly as a short one.

The Kelly retractors are intended for muscular retraction and the malleable retractors for visceral retraction; but don't confine yourself to any set plan. Be ingenious. Use whatever type retractor you need for your purpose. The flexible retractors are very adaptable.

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When you insert a malleable retractor, place your finger tips over the end of the blade so that you will not inadvertently damage any viscera or have undue pressure.

The malleable retractors are copper and silver plated. They are sent to you already curved so that you will not be tempted to straighten them after use.

Remember that copper hardens and cracks if bent repeatedly.

Therefore: to make your blades last—

1. Do not straighten blades after operation.
2. Do not bend them any more than necessary.
3. Do not bend them close to the handle.
4. Do not twist them. This cause wrinkles.

Carefully used, they will last for many years.

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PREPARATION

To use the retractor, wrap all parts in a muslin sheet and autoclave.

The arms can be attached to the ring before autoclaving or they can be detached to make the bundle a little shorter.

When placed on the instrument table the arms should be attached by the nurse, and the knobs under the ring tightened until the ring turns on the pivot pins with moderate resistance. If this is properly gauged, you will not have to touch these knobs again.

Now see that your patient is so placed on the table that the blocks on the side rails can come in the middle of your proposed incision. If your incision is to be a lateral one, position your patient a little to the opposite side, so that the ring will center over the wound.

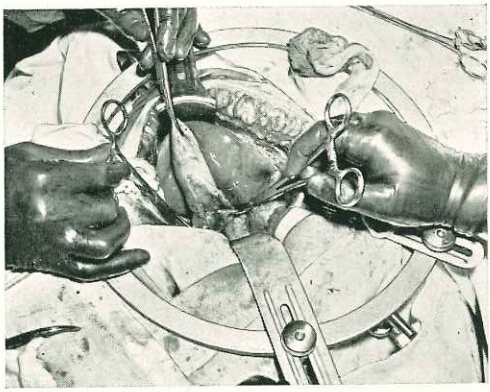
Now drape your patient and make your incision. Tie off bleeders so as not to have any forceps under the ring.

Now take the ring by the arms, unfold them and drop them over the sides of the table. An unsterile nurse lifts the bottom of the drapes and guides the arms into the blocks on the side rails. When the ring is properly centered over the incision, the screw is tightened. If only one nurse is available, she now goes around to the opposite side of the table and inserts the second arm and tightens the screw. The arms can now be covered by a sterile towel.

The universal joints between the ring and the arms makes it a simple matter to adjust the ring to the contours of the patient's abdomen.

PELVIC SURGERY

Now, if you are doing a pelvic operation, you first insert the 3 in. Kelly at the lower angle. Next place one of the 2¼ in. retractors in the left lower quadrant and draw out enough to clear your line of vision. Next place the other 2¼ in. retractor in the right lower quadrant. Now scoop all the small intestines out of the pelvis, and carefully pack them upward with the usual precautions. Then place your malleable retractors against the packs to hold them in place. If you have done all this effectively, you should not have to do any more retraction for the remainder of the operation.



Cholecystectomy

GALL BLADDER SURGERY

In gall bladder surgery position your patient to the left side of the table so that the ring will center over the wound. Then first place the 1½, or 2¼ inch retractor in the right upper quadrant and draw the costal margin to the right as much as the law will allow, even to the point of rotating the patient slightly to the right. Seize the gall bladder with a Kelly, free all adhesions, pack the colon downward and hold it with a malleable retractor. Now pack the stomach to the left and hold it with another malleable retractor. Sometimes the left lobe of the liver can be held up with a 2 or 3 inch retractor without danger of injuring it. . . . Now draw downward on the gall bladder, insert the hand over the liver to admit air and aid its descent, and then turn the gall bladder outward. If this is properly done, the ducts should be well exposed and will remain so without further retraction during the rest of the operation.

When the surgeon receives the retractors from the nurse, the knob and block on the handle should be just tight enough to keep it from sliding. When the retractors are inserted in the wound and the catch adjusted, a quarter turn of the knob is enough to loosen or tighten the catch.

STOMACH SURGERY

In stomach surgery the retractor holds up the costal margin in a manner that no human hand can maintain.

While you would not think that retraction is necessary in HERNIA operations, you will be amazed how much smoother your operation goes with steady adequate retraction.

The goal of all surgeons, ELEGANCE, EASE and COMFORT, are all dependent upon adequate, undisturbed retraction, which gives you a constant field. When you have to pause repeatedly to readjust retractors, it spoils the continuity of the procedure which you have so carefully studied and planned.

We believe that there are many excellent surgeons who never have had a chance to display their talents because they are continually hampered by lack of assistants, or because they are hindered more than helped by untrained or partly trained assistants.

The SMITH RETRACTOR gives you the help you need where you need it, and you, and not your assistant are the final judge of what that assistance shall be. The SMITH RETRACTOR maintains the exposure that you want without question and without tiring throughout your major procedure.

It saves TIME. It saves SHOCK. It saves YOUR NERVES.

You will amaze your confreres and yourself with new found self-reliance speed and technique.

Retraction and exposure are the foundation of an ELEGANT operation.

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